



# POP Briefs

## Family Planning Saves Women's Lives

Family planning programs provide women the means to improve birth spacing; postpone early, high-risk pregnancies; prevent dangerous late pregnancies; and avoid unplanned pregnancies. Recent estimates from the World Health Organization indicate a reduction in maternal deaths, from 585,000 to 515,000 between 1990 and 1995, with half of this decline attributed to lower fertility. However, there remains a large unmet need for contraception. Many women want to avoid pregnancy; yet of these, at least 150 million are not using family planning methods. This lack of access to services can cost women their health – and their lives. In many countries, pregnancy-related problems are the leading cause of death, resulting from births that are too close together, too early, or too late in life. Family planning could prevent 1 in 4 of these deaths and thousands of debilitating illnesses.

**Family planning prevents unintended pregnancy, reducing demand for abortion.** By increasing access to contraception counseling, supplies, and services, family planning programs play a strong role in reducing the incidence of abortion. In countries, such as Russia, where abortions are common and contraceptives scarce, maternal deaths from abortion drop dramatically with increased contraceptive use. USAID funds programs to improve treatment of the complications resulting from unsafe abortion in more than 30 countries. Following unsafe abortion, women who access our programs receive family planning counseling and services. These programs save lives and provide women with the information and services they need to avoid repeat abortion.

**Family planning can protect against HIV/AIDS.** Community-based family planning programs are often the primary, or only, source of health care for women.

Including HIV/AIDS prevention information and counseling with family planning services, particularly in high prevalence areas, could help stem the spread of the epidemic. Providers also can offer women and men condoms to prevent both unintended pregnancy and sexually transmitted infections, including HIV, while also educating them on correct and consistent use of these barrier methods.

### **The need for family planning is growing.**

Demographers estimate the number of adults of reproductive age will grow by more than 300 million in the next 20 years. As the desire for smaller families increases, as the number of women of reproductive age increases, and as the HIV/AIDS pandemic continues, family planning program providers will have to work hard to keep up with the demand for contraception, counseling, and education.

### **Facts and Figures**

Every minute:

- 380 women become pregnant
- 110 experience complications related to their pregnancies
- 40 experience unsafe abortions
- At least one woman dies.

One of every 48 women in a developing country dies from complications of pregnancy and childbirth. (1)

On average, in developing countries a pregnancy is 18 times more likely to end in the woman's death than in developed countries. (2)

The risk of maternal death is almost 3 times higher among adolescent girls 15-19 years old than for mothers aged 20-24. (1)



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Each year, women undergo an estimated 20 million unsafe abortions, resulting in an estimated 78,000 deaths. For every woman that dies from unsafe abortion, several others suffer lifelong disability and pain or complicate future pregnancies. (3)

A recent study of Latin American women found that spacing births 3 years lowers the risks for maternal deaths, third trimester bleeding, and other serious health problems. Women whose births occurred less than 2 years apart had greater risks for life-threatening conditions. (4)

The lifetime risk of maternal mortality is 1 in 263 in developing countries; in the United States, the risk is 1 in 3,500. (5)

Maternal mortality is highest in countries where women have little access to or use modern contraception. In Ethiopia, 2 percent of women use modern contraception and the risk of maternal death is 1 in 9. In Brazil, where nearly 3/4ths of women use birth control, maternal mortality rates are 1 in 130. (6)

*In Africa, the risk of dying during childbirth is so great, that it is not uncommon for women, as they are about to give birth, to say goodbye to their children. In Tanzania, mothers have a saying: "I am going to the sea to fetch a new baby, but the journey is long and dangerous and I may not return." (7)*

## USAID Response.

In Bangladesh, contraceptive use among women of reproductive age increased from 3 percent in 1971 to 54 percent in 1999. A nationwide initiative now integrates family planning services with maternal and child health, antenatal care, diagnosis and treatment of sexually transmitted infections (STIs), and referrals for other family health needs.

In Nepal, an estimated 11,000 women die each year from pregnancy or related illnesses. USAID supports a community mobilization effort that promotes safe motherhood and distributes an inexpensive home delivery kit to help women in remote mountainous areas manage a normal delivery as safely as possible. In countries throughout the former Soviet Union, USAID, working with other donors, supplies

health systems with training and contraceptives to help women avoid abortion. These programs have contributed to significant declines in the number of abortions in these countries.

In Egypt, USAID supported a study in which health care workers were trained to broaden their treatment for the complications resulting from unsafe abortion to include a discussion of contraception and provide a referral for family planning services. The proportion of patients who decided to begin using a contraceptive method increased from 37 percent to 62 percent. (8)

Informational entertainment has helped the public realize that family planning can help prevent HIV/AIDS. In West Africa, a USAID-supported drama series, *Les Cles de la Vie (Keys to Life)*, interweaves prevention and family planning messages in the story lines. 52 percent of all those exposed to the series reported taking specific positive action with regard to family planning; 73 percent reported taking positive action to prevent HIV/AIDS.

Brazil's PROQUALI program, supported by USAID, uses a wide range of educational materials to communicate *Mulher 'e pra se cuidar*, or "women are worth caring for and worth caring for themselves." The slogan is repeated in provider and client banners, counseling cards, murals, videos, posters, radio spots, street theatre, T-shirts, hats, and health facility signs and hats.

*Prepared November 2001*

Sources: (1) Population Reference Bureau, *Family Planning Saves Lives*, 3<sup>rd</sup> edition, 1997 (2) The prevention and management of unsafe abortion. Report of a Technical Working Group: Geneva, 12-15 April 1992. Geneva, WHO, 1993. (3) World Health Organization. 1997. *Abortion: A Tabulation of Available Data on the Frequency and Mortality of Unsafe Abortion*, Third Edition. Geneva: World Health Organization. (4) The Alan Guttmacher Institute, *Sharing Responsibility: Women, Society, & Abortion Worldwide*, 1999. (5) Population Resource Center, *The Replacement of Abortion by Contraception in Three Central Asian Republics*. 1998. (6) Agustin Conde-Agudelo and Jose M. Belizan, Maternal morbidity and mortality associated with interpregnancy interval: cross sectional study, *BMJ* 2000; 321:1255-1259 (18 November). (7) N. Sadik, *The State of World Population 1997*. UNFPA. New York, 1997. (8) The Egyptian Fertility Care Society and the Population Council, *Improving the Counseling and Medical Care of Post Abortion Patients in Egypt, Final Report*. (Cairo: EFCS, May 1995).